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PC8 1133

Attorney Docket No. \_\_\_\_\_

**COMBINED DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that

My residence, post office and address and citizenship are as stated below next to my name,

I believe I am the original, and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ADHESIVE COMPOUNDS OF BUTYL-TYPE RUBBER**

the specification of which (check one)

c is attached hereto ☒ was filed on April 28, 2006 as Application  
Serial No 10/577,888 and was amended on \_\_\_\_\_  
(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56 (a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below and foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

**PRIOR FOREIGN APPLICATION(S)**

			Priority claimed
<u>2,406,432</u>	<u>Canada</u>	<u>10/3/2002</u>	<input checked="" type="checkbox"/> <input type="checkbox"/>
(Number)	(Country)	(Day/month/year filed)	Yes No
<u>          </u>	<u>          </u>	<u>          </u>	<input type="checkbox"/> <input type="checkbox"/>
(Number)	(Country)	(Day/month/year filed)	Yes No
<u>          </u>	<u>          </u>	<u>          </u>	<input type="checkbox"/> <input type="checkbox"/>
(Number)	(Country)	(Day/month/year filed)	Yes No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose the material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(STATUS: patented/pending/abandoned)
<u>          </u>	<u>          </u>	<u>          </u>
(Application Serial No.)	(Filing Date)	(STATUS: patented/pending/abandoned)

PCG 1123

I hereby appoint the attorney(s) and/or agent(s) associated with Customer Number 34,947 to prosecute this application and to transact all business in the Patent and Trademark Office Connected therewith:

<b>SEND CORRESPONDENCE TO:</b>	<b>DIRECT TELEPHONE CALLS TO:</b>
Customer Number 34,947	Intellectual Property Department (412) 809-2233

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>FULL NAME OF SOLE OR FIRST INVENTOR</b> Adam Gronowski	<b>INVENTOR'S SIGNATURE</b> <i>Adam Gronowski</i>	<b>DATE</b> March 22, 2007
<b>RESIDENCE</b> 1236 Wiltshire Drive, Sarnia, Ontario, CANADA, N7S 3W2		<b>CITIZENSHIP</b> Canadian
<b>FULL NAME OF SECOND JOINT INVENTOR, IF ANY</b> Stephan Glander	<b>INVENTOR'S SIGNATURE</b> <i>S. Glander</i>	<b>DATE</b> 02.03.07
<b>RESIDENCE</b> EGGACHER 18 CH-8907 WETTSWIL <del>Gendelmsee 57, D-51375 Leverkusen, Germany</del>		<b>CITIZENSHIP</b> German
<b>FULL NAME OF THIRD JOINT INVENTOR, IF ANY</b>	<b>INVENTOR'S SIGNATURE</b>	<b>DATE</b>
<b>RESIDENCE</b>		<b>CITIZENSHIP</b>
<b>FULL NAME OF FOURTH JOINT INVENTOR, IF ANY</b>	<b>INVENTOR'S SIGNATURE</b>	<b>DATE</b>
<b>RESIDENCE</b>		<b>CITIZENSHIP</b>
<b>FULL NAME OF FIFTH JOINT INVENTOR, IF ANY</b>	<b>INVENTOR'S SIGNATURE</b>	<b>DATE</b>
<b>RESIDENCE</b>		<b>CITIZENSHIP</b>